

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

ADDRESS (number and street) ▼

4720 Montgomery Lane, Suite 200

☐ Check if different than previously reported. (ACC)

Bethesda

MD

20814-3449

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00089086

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☒ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Christina A. Metzler

Signature of Treasurer

Christina A. Metzler

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
09 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		69183.39
(b) Cash on Hand at Beginning of Reporting Period.....	77643.28	
(c) Total Receipts (from Line 19)	15148.42	123288.18
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	92791.70	192471.57
7. Total Disbursements (from Line 31)	25784.74	125464.61
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	67006.96	67006.96
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 09 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y
 09 / 30 / 2015
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

5842.04

43093.78

(ii) Unitemized

9290.14

80058.10

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

15132.18

123151.88

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

15132.18

123151.88

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

16.24

136.30

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

15148.42

123288.18

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

15148.42

123288.18

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	284.74	2338.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	284.74	2338.61
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25500.00	123000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	126.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	126.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	25784.74	125464.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25784.74	125464.61

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	15132.18	123151.88
34. Total Contribution Refunds (from Line 28(d))	0.00	126.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15132.18	123025.88
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	284.74	2338.61
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	284.74	2338.61

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Full Name (Last, First, Middle Initial)

A. Julie Renee Kalahar

Mailing Address 320 26th St Nw

City

Watertown

State

SD

Zip Code

57201-5815

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Area Technical Institute

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2015

Transaction ID : 67537959

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. Janis Elizabeth Battan

Mailing Address 3193 Allen Road

City

Elk

State

WA

Zip Code

99009-9581

FEC ID number of contributing
federal political committee.

C

Name of Employer

Eastern Washington Univ.

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2015

Transaction ID : 67537960

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

C. Trina Lea Schulz

Mailing Address 4915 Noble St

City

Shawnee

State

KS

Zip Code

66226-9797

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ of Kansas Hospital

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2015

Transaction ID : 67537961

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

91.26

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 7 OF 40
 (check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOT PAC)

Full Name (Last, First, Middle Initial)

A. DR Diane Lynn Smith

Mailing Address 120 Pleasant St Unit 306

City

Watertown

State

MA

Zip Code

02472-2398

FEC ID number of contributing
federal political committee.

C

Name of Employer

V.A. Medical Center

Occupation

Occupational Therapist

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

304.16

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 02 / 2015
Transaction ID : 67537962

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. Dianne Franklin Simons

Mailing Address 3009 Huntwick Ct

City

Richmond

State

VA

Zip Code

23233-7741

FEC ID number of contributing
federal political committee.

C

Name of Employer

Virginia Commonwealth University

Occupation

Occupational Therapist

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2015
Transaction ID : 67537963

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

C. LaDessa Forrest

Mailing Address 10207 W Yosemite Dr

City

Wichita

State

KS

Zip Code

67215-1580

FEC ID number of contributing
federal political committee.

C

Name of Employer

Aegis Therapy

Occupation

Occupational Therapist

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 02 / 2015
Transaction ID : 67537964

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

91.26

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 40
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Full Name (Last, First, Middle Initial)

A. Amy Hahn Solomon

Mailing Address 9568 La Quinta Dr

City

Lone Tree

State

CO

Zip Code

80124-4202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pima Medical Institute

Occupation

Occupational Therapist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

363.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	02	/	2015

Transaction ID : 67537968

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. Cathy M Mistovich

Mailing Address 2631 Monaldi Pkwy

City

Dyer

State

IN

Zip Code

46311-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer

South Suburban College

Occupation

Occupational Therapist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

246.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2015

Transaction ID : 67537970

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

C. Lori Vaughn

Mailing Address 175 Granville Rd

City

Southwick

State

MA

Zip Code

01077-9666

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bay Path College

Occupation

Occupational Therapist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

243.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2015

Transaction ID : 67537972

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.26

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 40

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOT PAC)

Full Name (Last, First, Middle Initial)

A. Ivelisse Lazzarini

Mailing Address 5731 Thompson Rd

City

Syracuse

State

NY

Zip Code

13214-1242

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lemoyne College

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2		2	0	1	5		

Transaction ID : 67537974

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. Guy Louis McCormack

Mailing Address 774 23rd Ave

City

San Francisco

State

CA

Zip Code

94121-3710

FEC ID number of contributing
federal political committee.

C

Name of Employer

Samuel Merritt Univ.

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.36

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1		2	0	1	5		

Transaction ID : 67537975

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

C. Wendy Welch Jones

Mailing Address 28222 Timber Vlg

City

Magnolia

State

TX

Zip Code

77355-4224

FEC ID number of contributing
federal political committee.

C

Name of Employer

Coastal EMS

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2		2	0	1	5		

Transaction ID : 67537976

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.26

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Full Name (Last, First, Middle Initial)

A. Jesse Valdez Chavez

Mailing Address Po Box 1901

City

Mesilla Park

State

NM

Zip Code

88047-1901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gadsden Independent District

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 02 / 2015

Transaction ID : 67537978

Amount of Each Receipt this Period

30.38

Full Name (Last, First, Middle Initial)

B. Jennifer Lee McLaughlin

Mailing Address 105 Ruth Ellen Ct S

City

Newark

State

DE

Zip Code

19711-8511

FEC ID number of contributing
federal political committee.

C

Name of Employer

PUMH, Inc.

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2015

Transaction ID : 67537979

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

C. DR Kelly Landry Alig

Mailing Address 1900 Gravier St

City

New Orleans

State

LA

Zip Code

70112-2262

FEC ID number of contributing
federal political committee.

C

Name of Employer

Louisiana State University HSC New Orl

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.78

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2015

Transaction ID : 67537980

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOT PAC)

Full Name (Last, First, Middle Initial)

A. Margo A Kreger

Mailing Address 5407 Carey Dr

City State Zip Code
 Cedar Falls IA 50613-7044

FEC ID number of contributing federal political committee.

C

Name of Employer Occupation
 Hawkeye Community College Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 02 2015

Transaction ID : 67537981

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. Esther Bernice Bell

Mailing Address 203 McClure St

City State Zip Code
 Gonzales TX 78629-4213

FEC ID number of contributing federal political committee.

C

Name of Employer Occupation
 Retired Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 04 2015

Transaction ID : 67537982

Amount of Each Receipt this Period

60.83

Full Name (Last, First, Middle Initial)

C. Susan J Harris

Mailing Address 2124 Sunset Blvd

City State Zip Code
 San Diego CA 92103-1527

FEC ID number of contributing federal political committee.

C

Name of Employer Occupation
 Therapy Specialists Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 06 2015

Transaction ID : 67537983

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

121.67

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 40

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Full Name (Last, First, Middle Initial)

A. Rita Patricia Fleming-Castaldy

Mailing Address 551 Sudbury St

City

Marlborough

State

MA

Zip Code

01752-1656

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Scranton

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2015

Transaction ID : 67537984

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. Gerri Ann Duran

Mailing Address 4920 Calle De Tierra Ne

City

Albuquerque

State

NM

Zip Code

87111-2927

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed Occupational Therapist

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2015

Transaction ID : 67537985

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

C. Yvonne Michielle Randall

Mailing Address 6576 Appletree Cir

City

Las Vegas

State

NV

Zip Code

89103-4325

FEC ID number of contributing
federal political committee.

C

Name of Employer

Touro University Nevada

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

930.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2015

Transaction ID : 67537986

Amount of Each Receipt this Period

90.00

SUBTOTAL of Receipts This Page (optional)..... ►

150.84

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOT PAC)

Full Name (Last, First, Middle Initial)

A. MRS Laura Elizabeth Robinson

Mailing Address 2490 Dongara Dr Apt 510

City State Zip Code
Dexter MI 48130-1579

FEC ID number of contributing
federal political committee.

C

Name of Employer
Heartland Health Care Center of Ann Ar

Occupation
Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.32

Date of Receipt

09 / 02 / 2015

Transaction ID : 67537990

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. Denise Marie Miller

Mailing Address 12 Faircliff Ct

City State Zip Code
Glendale CA 91206-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer
GAMC Therapy and Wellness Center

Occupation
Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.16

Date of Receipt

09 / 08 / 2015

Transaction ID : 67556382

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

C. David Dennis Clark

Mailing Address 1012 Demorest Mount Airy Hwy

City State Zip Code
Mount Airy GA 30563-3505

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation
Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.74

Date of Receipt

09 / 08 / 2015

Transaction ID : 67556384

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

91.26

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 40
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOT PAC)

Full Name (Last, First, Middle Initial)

A. Janice Diane Hinds

Mailing Address 2467 S Lincoln St

City State Zip Code
 Denver CO 80210-5016

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Col Dept of Human Services, Col Mental

Occupation
 Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 09 / 2015

Transaction ID : 67556385

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. Stephanie Singleton

Mailing Address 78 Coryphodon Ln

City State Zip Code
 Jemez Springs NM 87025-9518

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Presbyterian Home Health Svcs

Occupation
 Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 10 / 2015

Transaction ID : 67556386

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

C. Rachelle Dorne

Mailing Address 601 Nw 82nd Ave Apt 604

City State Zip Code
 Plantation FL 33324-1400

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Nova Southeastern University

Occupation
 Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.16

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 10 / 2015

Transaction ID : 67556387

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

91.26

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 40

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOT PAC)

Full Name (Last, First, Middle Initial)

A. Neil Harverson

Mailing Address 56 Ridge Rd

City

New Milford

State

CT

Zip Code

06776-3131

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Occupational Therapy Associat

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	5

Transaction ID : 67556390

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. Dahlia C Castillo

Mailing Address 6960 Bruce Bissonette Dr

City

El Paso

State

TX

Zip Code

79912-8516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pima Medical Institute

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

743.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	5

Transaction ID : 67556391

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. Diana Rae Davis

Mailing Address 1013 Twin Oaks Dr

City

Morgantown

State

WV

Zip Code

26508-9430

FEC ID number of contributing
federal political committee.

C

Name of Employer

West Virginia Univ

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	5

Transaction ID : 67556392

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

102.84

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 40

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOT PAC)

Full Name (Last, First, Middle Initial)

A. Patrick James Bloom

Mailing Address 410 Elm Tree Lane

City	State	Zip Code
Vernon Hills	IL	60061-1806

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sundance Rehab CorpOccupation
Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2015

Transaction ID : 67556393

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. Stephen B Kern

Mailing Address 1023 Kimball St

City	State	Zip Code
Philadelphia	PA	19147-3820

FEC ID number of contributing
federal political committee.

C

Name of Employer
Thomas Jefferson UnivOccupation
Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2015

Transaction ID : 67556394

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

C. Michelle Rae Parolise

Mailing Address 6822 Loyola Dr

City	State	Zip Code
Huntington Beach	CA	92647-4054

FEC ID number of contributing
federal political committee.

C

Name of Employer
Santa Ana CollegeOccupation
Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2015

Transaction ID : 67556395

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

91.26

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Full Name (Last, First, Middle Initial)

A. Monica Lee Robinson

Mailing Address 453 W 10th Ave

City State Zip Code
Columbus OH 43210-2205

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Ohio State University Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2015

Transaction ID : 67556396

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Cynthia A Robinson

Mailing Address 1200 N Stonewall Ave

City State Zip Code
Oklahoma City OK 73117-1215

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Univ of Oklahoma Health Sciences Cente Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2015

Transaction ID : 67556397

Amount of Each Receipt this Period

30.38

Full Name (Last, First, Middle Initial)

C. Patricia E Fingerhut

Mailing Address 2201 Twin Oaks Blvd

City State Zip Code
Kemah TX 77565-2154

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Univ of TX Med Branch Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.16

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2015

Transaction ID : 67556398

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOT PAC)

Full Name (Last, First, Middle Initial)

A. Rebecca Ann Piazza

Mailing Address 12014 Nw 136th St

City State Zip Code
Alachua FL 32615-6549

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Shands Rehab Hospital Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2015

Transaction ID : 67556399

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. MRS Kim Ann Mahoney

Mailing Address 1210 Puritan Ave

City State Zip Code
Bronx NY 10461-6153

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Top Health Occupational Therapy Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2015

Transaction ID : 67556401

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

C. MS Sara Marie Androyna

Mailing Address 50634 Jefferson Apt # 219

City State Zip Code
New Baltimore MI 48047-2369

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Lapeer County Intermediate School Dist Occupational Therapy Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2015

Transaction ID : 67556402

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

110.84

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 OF 40

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Full Name (Last, First, Middle Initial)

A. Deborah Lynn Hinerfeld

Mailing Address 2820 Stoneglen Close

City

Roswell

State

GA

Zip Code

30076-4001

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Atlanta Speech School

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 09 / 2015

Transaction ID : 67556413

Amount of Each Receipt this Period

730.00

Full Name (Last, First, Middle Initial)

B. Mary Magdalena Schmidt

Mailing Address 6804 Astair Ave Nw

City

Albuquerque

State

NM

Zip Code

87120-4420

FEC ID number of contributing
federal political committee.

C

Name of Employer

Brown Mackie Univ

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2015

Transaction ID : 67556420

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

C. Susan Kay Peters

Mailing Address 4601 College Blvd

City

Farmington

State

NM

Zip Code

87402-4609

FEC ID number of contributing
federal political committee.

C

Name of Employer

San Juan College

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2015

Transaction ID : 67556424

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1460.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 40

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Full Name (Last, First, Middle Initial)

A. Tanya Jeanne Bay

Mailing Address 3330 Riva Ridge Dr

City	State	Zip Code
Fort Collins	CO	80526-2800

FEC ID number of contributing
federal political committee.

C

Name of Employer	Occupation
Univ. of Colorado Health	Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2015

Transaction ID : 67556425

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. Carolyn Baum

Mailing Address 4444 Forest Park Ave

City	State	Zip Code
Saint Louis	MO	63108-2212

FEC ID number of contributing
federal political committee.

C

Name of Employer	Occupation
Washington Univ School of Medicine	Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2015

Transaction ID : 67556426

Amount of Each Receipt this Period

30.38

Full Name (Last, First, Middle Initial)

c. MISS Kelsi A Shough

Mailing Address 4510 Ironton Ave Apt 6207

City	State	Zip Code
Lubbock	TX	79407-3787

FEC ID number of contributing
federal political committee.

C

Name of Employer	Occupation
Texas Tech University Health Sciences	Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2015

Transaction ID : 67556427

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

91.22

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Full Name (Last, First, Middle Initial)

A. Christine Lynn Kroll

Mailing Address 1528 Chase Blvd

City State Zip Code
 Greenwood IN 46142-1559

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Healthcare Therapy Service Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.78

Date of Receipt

09 / 09 / 2015

Transaction ID : 67556428

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. Anne Elizabeth Dickerson

Mailing Address 1806 Planters Walk

City State Zip Code
 Greenville NC 27858-8426

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 East Carolina Univ Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

09 / 09 / 2015

Transaction ID : 67556432

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

C. Gail Fisher

Mailing Address 1003 S Elmwood Ave

City State Zip Code
 Oak Park IL 60304-2109

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 University of Illinois Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.65

Date of Receipt

09 / 08 / 2015

Transaction ID : 67556433

Amount of Each Receipt this Period

60.83

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

121.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOT PAC)

Full Name (Last, First, Middle Initial)

A. Susan K Goszewski

Mailing Address 225 Oregon Rd

City

Cheshire

State

CT

Zip Code

06410-1827

FEC ID number of contributing
federal political committee.

C

Name of Employer

Yale New Haven Hosp

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.74

Date of Receipt

09 / 18 / 2015

Transaction ID : 67748369

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. Bruce Allan Haack

Mailing Address 13604 Ne 42nd Ave

City

Vancouver

State

WA

Zip Code

98686-2606

FEC ID number of contributing
federal political committee.

C

Name of Employer

Salmon Creek Children's Therapy

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

09 / 20 / 2015

Transaction ID : 67748370

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

c. DR Kathleen D Weissberg

Mailing Address 115 Beaufort Lane

City

Milford

State

DE

Zip Code

19963-3780

FEC ID number of contributing
federal political committee.

C

Name of Employer

Endura Care Therapy Mgmt

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.21

Date of Receipt

09 / 17 / 2015

Transaction ID : 67748372

Amount of Each Receipt this Period

60.83

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

174.58

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOT PAC)

Full Name (Last, First, Middle Initial)

A. Harriett Smith Bynum

Mailing Address 100 Cottonwood Dr

City State Zip Code
Oakdale PA 15071-1108

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Kent State University, East Liverpool Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 21 / 2015

Transaction ID : 67748373

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. Lisa Kay Iffland

Mailing Address 2417 W Gladys Ave

City State Zip Code
Chicago IL 60612-4806

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Wright College Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 21 / 2015

Transaction ID : 67748374

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

C. Marjorie Sue Meinheit

Mailing Address 1757 Holly St

City State Zip Code
Kansas City MO 64108-4138

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Self Employed Occupational Therapist Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.42

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 21 / 2015

Transaction ID : 67748380

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

260.84

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 40

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Full Name (Last, First, Middle Initial)

A. Carla Sue Wilhite

Mailing Address 1434 Adams St Ne

City

Albuquerque

State

NM

Zip Code

87110-5047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ. of North Dakota

Occupation

Occupational Therapist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

277.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2015

Transaction ID : 67748390

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. Guy Louis McCormack

Mailing Address 774 23rd Ave

City

San Francisco

State

CA

Zip Code

94121-3710

FEC ID number of contributing
federal political committee.

C

Name of Employer

Samuel Merritt Univ.

Occupation

Occupational Therapist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

273.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	18	/	2015

Transaction ID : 67748392

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

C. Mary Margaret Arnold

Mailing Address 1119 Maysville Ave

City

Zanesville

State

OH

Zip Code

43701-5557

FEC ID number of contributing
federal political committee.

C

Name of Employer

Zane State College

Occupation

Occupational Therapist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	20	/	2015

Transaction ID : 67748394

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

91.26

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 25 OF 40
 (check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOT PAC)

Full Name (Last, First, Middle Initial)

A. Mary Elizabeth Craig-Oatley

Mailing Address 201 Summerhaze Ct

City

Ormond Beach

State

FL

Zip Code

32174-4871

FEC ID number of contributing
federal political committee.

C

Name of Employer

Daytona State College

Occupation

Occupational Therapist

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

273.78

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2015

Transaction ID : 67748395

Amount of Each Receipt this Period

121.68

Full Name (Last, First, Middle Initial)

B. Kimberly Bryze

Mailing Address 4001 Elm St

City

Downers Grove

State

IL

Zip Code

60515-2107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Midwestern Univ

Occupation

Occupational Therapist

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2015

Transaction ID : 67748396

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Mr. Scott David Nordquist

Mailing Address 11874 Canterbury Dr.

City

Sterling Heights

State

MI

Zip Code

48312-3019

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. John's Hospital

Occupation

Occupational Therapy Assistant

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : 67748397

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

252.10

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOT PAC)

Full Name (Last, First, Middle Initial)

A. Jennifer C Johnson

Mailing Address 1126 N Cedar St

City State Zip Code
Abilene KS 67410-2022

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Hoover Bachman Assoc Occupational Therapist

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 15 / 2015

Transaction ID : 67748398

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. Donna M Costa

Mailing Address 874 American Pacific Dr

City State Zip Code
Henderson NV 89014-8800

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Stony Brook University Occupational Therapist

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.94

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 20 / 2015

Transaction ID : 67748401

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

C. Brent Howard Braveman

Mailing Address 1 Hermann Park Ct Apt 432

City State Zip Code
Houston TX 77021-2293

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
M.D. Anderson Cancer Center Occupational Therapist

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

544.98

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2015

Transaction ID : 67748402

Amount of Each Receipt this Period

60.83

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

121.67

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 27 OF 40
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Full Name (Last, First, Middle Initial)

A. Carol Siebert

Mailing Address 304 Forbush Mountain Dr

City	State	Zip Code
Chapel Hill	NC	27514-1907

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed Occupational Therapist

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2015

Transaction ID : 67748403

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. Pamela Ellen Toto

Mailing Address 7008 Lyons View Ct

City	State	Zip Code
Murrysville	PA	15668-1056

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ of Pittsburgh

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2015

Transaction ID : 67748405

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

C. Timothy Justin Wolf

Mailing Address 620 Mayflower Dr

City	State	Zip Code
Wentzville	MO	63385-3563

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Missouri

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2015

Transaction ID : 67748406

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

91.26

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 28 OF 40
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOT PAC)

Full Name (Last, First, Middle Initial)

A. Anna Haertling

Mailing Address 7200 Alameda Rd Apt 504

City	State	Zip Code
Houston	TX	77054-2148

FEC ID number of contributing
federal political committee.

C

Name of Employer
TIRR Memorial/HermannOccupation
Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2015

Transaction ID : 67748408

Amount of Each Receipt this Period

30.38

Full Name (Last, First, Middle Initial)

B. Thomas F Fisher

Mailing Address 8486 Admirals Landing Way

City	State	Zip Code
Indianapolis	IN	46236-9174

FEC ID number of contributing
federal political committee.

C

Name of Employer
Indiana UniversityOccupation
Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2015

Transaction ID : 67748672

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Dennis Sullivan Cleary

Mailing Address 453 W 10th Ave

City	State	Zip Code
Columbus	OH	43210-2205

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Ohio State UnivOccupation
Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2015

Transaction ID : 67748680

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

210.38

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOT PAC)

Full Name (Last, First, Middle Initial)

A. LaDessa Forrest

Mailing Address 10207 W Yosemite Dr

City State Zip Code
 Wichita KS 67215-1580

FEC ID number of contributing
federal political committee.

C

Name of Employer

Aegis Therapy

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.74

Date of Receipt

09 / 21 / 2015

Transaction ID : 67748830

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Amy Hahn Solomon

Mailing Address 9568 La Quinta Dr

City State Zip Code
 Lone Tree CO 80124-4202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pima Medical Institute

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.74

Date of Receipt

09 / 23 / 2015

Transaction ID : 67774389

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Robin G B Lampman

Mailing Address Po Box 2559

City State Zip Code
 Kenai AK 99611-2559

FEC ID number of contributing
federal political committee.

C

Name of Employer

North Star Occupational Therapy

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.82

Date of Receipt

09 / 23 / 2015

Transaction ID : 67774409

Amount of Each Receipt this Period

30.47

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.47

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Full Name (Last, First, Middle Initial)

A. Gloria R Lucker

Mailing Address 2495 Main St Ste 234

City State Zip Code
Buffalo NY 14214-2152

FEC ID number of contributing
federal political committee.

C

Name of Employer
DBA Optimal Therapy Associates Service

Occupation
Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.66

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2015

Transaction ID : 67774410

Amount of Each Receipt this Period

60.83

Full Name (Last, First, Middle Initial)

B. Emily S Pugh

Mailing Address 1744 Nw 7th Pl

City State Zip Code
Gainesville FL 32603-1221

FEC ID number of contributing
federal political committee.

C

Name of Employer
Univ of Florida

Occupation
Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 24 / 2015

Transaction ID : 67774411

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

C. Dawn Albarado Sonnier

Mailing Address 35921 Sarasota Ave

City State Zip Code
Denham Springs LA 70706-8633

FEC ID number of contributing
federal political committee.

C

Name of Employer
DHH NORTHLAKE SUPPORTS AND SERVICE

Occupation
Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 24 / 2015

Transaction ID : 67774413

Amount of Each Receipt this Period

60.83

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

152.08

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 40

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Full Name (Last, First, Middle Initial)

A. Florence B Hannes

Mailing Address 32 Lake Rd

City

Salisbury Mills

State

NY

Zip Code

12577-5000

FEC ID number of contributing
federal political committee.

C

Name of Employer

Orange County Community College

Occupation

Occupational Therapist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

464.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2015

Transaction ID : 67774418

Amount of Each Receipt this Period

60.83

Full Name (Last, First, Middle Initial)

B. Andrea M Bilics

Mailing Address 20 Lexington Ln

City

Millis

State

MA

Zip Code

02054-1441

FEC ID number of contributing
federal political committee.

C

Name of Employer

Worcester State College

Occupation

Occupational Therapist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2015

Transaction ID : 67774419

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

C. Nathan Bernard Herz

Mailing Address 100 Baldwin Blvd

City

Fishersville

State

VA

Zip Code

22939-2375

FEC ID number of contributing
federal political committee.

C

Name of Employer

Georgia Health Sciences Univ.

Occupation

Occupational Therapist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2015

Transaction ID : 67774421

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

121.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 40

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOT PAC)

Full Name (Last, First, Middle Initial)

A. Carol Rose Scheerer

Mailing Address 2121 Saint James Ave Apt 4

City	State	Zip Code
Cincinnati	OH	45206-3611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Xavier University

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2015

Transaction ID : 67774422

Amount of Each Receipt this Period

60.83

Full Name (Last, First, Middle Initial)

B. Kristie Patten Koenig

Mailing Address 721 N Jackson St

City	State	Zip Code
Media	PA	19063-2553

FEC ID number of contributing
federal political committee.

C

Name of Employer

Temple University

Occupation

Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2015

Transaction ID : 67774427

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

C. Jodie Marie Valls

Mailing Address 183 Lake Carnegie Ct

City	State	Zip Code
Laredo	TX	78041-2062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Laredo Community College

Occupation

Occupational Therapy Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2015

Transaction ID : 67774428

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

121.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 40

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOT PAC)

Full Name (Last, First, Middle Initial)

A. Kory Jean Hall

Mailing Address 209 1st St Sw

City

Watertown

State

SD

Zip Code

57201-4210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Area Technical Institute

Occupation

Occupational Therapy Assistant

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2		2	0	1	5		

Transaction ID : 67774429

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. Rebecca E Argabrite Grove

Mailing Address 41718 Browns Farm Ln

City

Leesburg

State

VA

Zip Code

20176-6026

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Occupational Therapy Associat

Occupation

Occupational Therapist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4		2	0	1	5		

Transaction ID : 67774430

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Sharon Thomson Reitz

Mailing Address 8544 Window Latch Way

City

Columbia

State

MD

Zip Code

21045-5637

FEC ID number of contributing
federal political committee.

C

Name of Employer

Towson Univ

Occupation

Occupational Therapist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5		2	0	1	5		

Transaction ID : 67774432

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

100.84

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 40

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Full Name (Last, First, Middle Initial)

A. Amy Jo Lamb

Mailing Address 7024 N Meadows Way

City	State	Zip Code
Dexter	MI	48130-8637

FEC ID number of contributing
federal political committee.

C

Name of Employer
Eastern Michigan Univ. and DBA/ AJ LamOccupation
Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2015

Transaction ID : 67774433

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

B. Penelope A Moyers Cleveland

Mailing Address 575 Cleveland Ave S Apt 10

City	State	Zip Code
Saint Paul	MN	55116-1261

FEC ID number of contributing
federal political committee.

C

Name of Employer
St. Catherine UnivOccupation
Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2015

Transaction ID : 67774435

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

C. DR Ruth S Ramsey

Mailing Address 50 Acacia Ave

City	State	Zip Code
San Rafael	CA	94901-2230

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dominican Univ of CAOccupation
Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2015

Transaction ID : 67774438

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

91.26

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 35 OF 40
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Full Name (Last, First, Middle Initial)

A. Michael Thomas Berthelette

Mailing Address 4311 S Cameron Ave

City	State	Zip Code
Tampa	FL	33611-1327

FEC ID number of contributing
federal political committee.

C

Name of Employer
BMR Health Services, Inc.Occupation
Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2015

Transaction ID : 67774439

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. MRS Sarah McKinnon

Mailing Address 183 I Street

City	State	Zip Code
Boston	MA	02127-4113

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mass. General HospitalOccupation
Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2015

Transaction ID : 67774441

Amount of Each Receipt this Period

91.25

Full Name (Last, First, Middle Initial)

C. Jennifer Fitzgerald Kovanis

Mailing Address 700 Amster Green Dr

City	State	Zip Code
Atlanta	GA	30350-4139

FEC ID number of contributing
federal political committee.

C

Name of Employer
DBA Premier Children's Therapy CenterOccupation
Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2015

Transaction ID : 67950858

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

691.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPA)

Full Name (Last, First, Middle Initial)

A. Kathryn Melin Eberhardt

Mailing Address 142 North Rebecca Street

City State Zip Code
Glenwood IL 60425-1408

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
South Suburban College Occupational Therapy Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : 67950867

Amount of Each Receipt this Period

60.83

Full Name (Last, First, Middle Initial)

B. Diana Lynn Gibson-Lee

Mailing Address 7450 W Dyer Rd

City State Zip Code
Twining MI 48766-9773

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Retired Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2015

Transaction ID : 67950870

Amount of Each Receipt this Period

30.38

Full Name (Last, First, Middle Initial)

C. MR Luis de Leon Arabit

Mailing Address 458 Rosemont Ave

City State Zip Code
Pasadena CA 91103-3557

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
White Memorial Medical Center Occupational Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2015

Transaction ID : 67950935

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

191.21

5842.04

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 40

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Full Name (Last, First, Middle Initial)

A. Friends Of Schumer

Mailing Address 192 Lexington Avenue Suite 1001

City	State	Zip Code
New York	NY	10016

Purpose of Disbursement
campaign contribution

Candidate Name

Sen. Charles E. Schumer

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2015

Transaction ID : 67749796

Amount of Each Disbursement this Period

2500.00

campaign contribution

Full Name (Last, First, Middle Initial)

B. Renee Ellmers For Congress Committee

Mailing Address PO Box 99567

City	State	Zip Code
Raleigh	NC	27624

Purpose of Disbursement
campaign contribution

Candidate Name

Rep. Renee Ellmers RN

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NC District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2015

Transaction ID : 67749797

Amount of Each Disbursement this Period

1000.00

campaign contribution

Full Name (Last, First, Middle Initial)

C. Democratic Senatorial Campaign Committee (DSCC)

Mailing Address 120 Maryland Avenue, NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
campaign contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2015

Transaction ID : 67749798

Amount of Each Disbursement this Period

5000.00

campaign contribution

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8500.00

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 40

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPA)

Full Name (Last, First, Middle Initial)

A. National Republican Congressional Committee (NRCC)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2015

Mailing Address 320 1st St., SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
campaign contribution

011

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Transaction ID : 67749799

Amount of Each Disbursement this Period

10000.00

campaign contribution

Full Name (Last, First, Middle Initial)

B. Loeb sack For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2015

Mailing Address PO Box 3013

City	State	Zip Code
Iowa City	IA	52244

Purpose of Disbursement
campaign contribution

011

Candidate Name

Category/
Type**Rep. David Wayne Loeb sack**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2016	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼	

State: IA District: 02

Transaction ID : 67778747

Amount of Each Disbursement this Period

2500.00

campaign contribution

Full Name (Last, First, Middle Initial)

C. Levin For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2015

Mailing Address PO Box 37

City	State	Zip Code
Roseville	MI	48066

Purpose of Disbursement
campaign contribution

011

Candidate Name

Category/
Type**Rep. Sandy M. Levin**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2016	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼	

State: MI District: 09

Transaction ID : 67778748

Amount of Each Disbursement this Period

1000.00

campaign contribution

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

13500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 40

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPA)

Full Name (Last, First, Middle Initial)

A. Bilirakis For Congress

Mailing Address PO Box 606

City	State	Zip Code
Tarpon Springs	FL	34688

Purpose of Disbursement
campaign contribution

Candidate Name

Rep. Gus M. BilirakisOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : 67778751

Amount of Each Disbursement this Period

1000.00

campaign contribution

Full Name (Last, First, Middle Initial)

B. Hoyer For CongressMailing Address 700 13th Street Nw
Suite 600

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
campaign contribution

Candidate Name

Rep. Steny H. HoyerOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : 67778752

Amount of Each Disbursement this Period

2500.00

campaign contribution

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3500.00

25500.00
